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APPLICATION NO. FILING DATE		FIRST NAMED INVEN		TOR ATTORNEY DOCKET NO.			CONFIRMATION NO.
10/534,469	10/534.469 11/16/2005		Shlomo Margel		4110-40		7014
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nonprovisional	YES	\$755 T	\$300		009 HAHMED2	\$1055 00600027	05/18/2009 <b>10534469</b>
EXAMINER		ART UNIT	CLASS-SUBCLASS	01 FC:8			755.00 OP
DAVIS, RUTH A 1651			435-219000	02 FC:1504 03 FC:0601 In the patent front page, list			300.00 OP
CFR 1.363).  Change of corresp Address form PTO/SE  "Fee Address" indi PTO/SB/47; Rev 03-0 Number is required.  ASSIGNEE NAME A	ication (or "Fee Address )2 or more recent) attack ND RESIDENCE DAT. less an assignee is ident h in 37 CFR 3.11. Com	(1) the names of up to 3 registered patent attorneys or agents OR, alternatively.  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.  THE PATENT (print or type)  data will appear on the patent. If an assignee is identified below, the document has been filed for T a substitute for filing an assignment.  (B) RESIDENCE: (CITY and STATE OR COUNTRY)					
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Authorized Signature	Mh	w			18, 2009		
J	<sub>ne</sub> Gordon P. Kl	lancnik	<del></del>	Registration No. 50,964			
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